Kansas
Department for Aging and Disability Services

SAMPLE TOOL

Use of this tool is not mandated by KDADS for regulatory compliance nor does their completion ensure regulatory compliance. Nursing Homes are welcome to adapt this tool to meet their needs.

QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT

PROCESS IMPROVEMENT TEAM TOOL

Representatives and Facilitators listed on this chart are only recommendations. Facilities should individualize to their facility. Facilities may also want to consider having a resident on the team attending a portion of the meeting where resident information is not discussed.

COMPOSITION: Coordinator and at least 2 Other Staff
- o Staff most affected issue or need for improvement
- o Staff who can provide information to better understand the issue
- o Staff who will effectively receive and provide communication to other staff

MEETING FREQUENCY
- o Risk Management Team - Weekly
- o Other Teams - Monthly
- o QAA and PI Committee – Quarterly

TEAM TASKS:

Identify/Assess	Analyze	Develop/Plan	Test and Implement	Evaluate
What is the current status of the nursing home or the resident related to problem? *What needs to improve?*	*What is the real problem?* *What is the root cause (s) of the problem?*	*What change is needed to resolve the nursing home's problem or the resident's problem?* *Develop an Action Plan or Care Plan with goal(s) and process(es)/ interventions*	*Communicate Action Plan for nursing home including goal(s) and process(es). Trial it on a small scale Communicate Care Plan for resident including new goals & try new interventions*	*Was the desired outcome achieved?* *Adopt, Adapt or Abandon Action Plan Care Plan* *Report outcome to QAA and PI Committee*

QAA AND PI COMMITTEE
- Review Team Reports
- Establish Benchmarks and Identify Trends and Outliers and needed follow-up Action Plans
- Assign New Teams
- Select Performance Improvement Projects

QIS Manual with Critical Elements (CE) and Facility Level Task Forms available at:
http://www.aging.ks.gov/Manuals/QISManual.htm

		TEAM	REPRESENTATIVES	FACILITATOR
1.		**RISK MANAGEMENT – Residents with the following:** • Unplanned Return to Hospital (QIS CE) • Resident/Family Concerns/Complaints • New Admission • Pressure Ulcers (QIS CE) • Weight Loss/Hydration (QIS CE) • Wounds • Pain (QIS CE) • Falls (QIS General CE) • Infection (QIS Task) • Elopements/Wandering Behavior/Other Behaviors (QIS CE) • Restraint Use (QIS CE) • Pain	Nursing All Departments affected by Risk Issue (Include housekeeping, especially for weight loss, as they frequently observe residents.)	QA/PI Nurse Director of Nursing
2.		**QUALITY MEASURE REVIEW**	DON MDS Coordinator	Director of Nursing
3.		**INFECTION CONTOL** (QIS Facility Task) • Tracking • Investigation • Immunizations	Nursing Certified Nursing Housekeeping Laundry Dietary	Infection Control Nurse
4.		**URINARY** (QIS CE) • Incontinence • Catheter Use • Infections • Hydration (QIS CE)	Nursing Certified Nursing Dietary Activity	Director of Nursing
5.		**RESTORATIVE** (QIS CE) • Number of Residents by Neighborhood	Restorative Nurse Restorative CNA Activity	Director of Nursing

	TEAM	REPRESENTATIVES	FACILITATOR
6.	**DIETARY** • Meal Satisfaction • Menu Planning • Dining Observations(QIS Facility Task) • Kitchen/Food Service Observation (QIS Facility Task)	Dietary Activity Nursing Certified Nursing	Dietary Manager Dietitian
7.	**PHARMACY** • Monthly Review Finding/Follow up • Unnecessary Medications (QIS CE) • Medication Risk vs. Benefit Document. • Medication Monitoring – Diagnosis, Methods, Effectiveness, Adverse Effects • Antipsychotic Medication Use • Medication Administration Observation/Error Rate (QIS Facility Task) • Medication Storage/Medication Room (QIS Facility Task)	Pharmacy Nursing Certified Nursing Social Services Activity	Pharmacist Director of Nursing
8.	**PERSON RESPECTED CARE** • Resident Satisfaction Survey • Culture Change Projects	Resident All Departments	Administrator
9.	**ACTIVITY (QIS CE)** • Resident Interview • Trends • 1:1 Case Load/Staffing • Small Group/Resident Directed Activities • Attendance Documentation Review	Activity Nursing Certified Nursing Chaplin Resident (When no specific Resident Information Discussed)	Activity Director
10.	**SOCIAL SERVICES** • Admission, Transfer, Discharge • Hospice (QIS CE) Referrals, Case Load • Personal Funds (QIS Task) • Grievance/Complaint/Log Trends (QIS Task) • Behavior Management Program (QIS CE) • Behavior Flow Sheets	Social Services Nursing Business Office Representative from Pharmacy Team	Director of Social Services
11.	**LABORATORY** • Orders • Results Follow-up	Nursing Medical Records	Director of Nursing

	TEAM	REPRESENTATIVES	FACILITATOR

12.	**MEDICAL RECORD REVIEW**
	• Chart Audit/Trends
	• Record Requests
	    o Medicare Review
	    o Legal Review
	    o Family
	    o Insurance
	    o Liability Notices &
	       Beneficiary Appeal Rights
	       (QIS Task)
		Medical Records
		Director of Nursing
		Business Office
			Medical Records
			Coordinator

13.	**THERAPY** • Part A Residents • Part B Residents • Certifications/Recertification	Therapy Nursing MDS Coordinator Restorative Nurse/CNA	Therapy Coordinator
14.	**HOUSEKEEPING/LAUNDRY** • Missing Items • Complaints	Housekeeping Social Services	Housekeeping Director
15.	**PLANT OPERATIONS** • Preventative Maintenance • Call Lights/Systems, Water Temps, Door Monitoring • Emergency Readiness o Water, Power • Physical Plant Conditions (QIS Task) • Work Order Completion Rate	All Departments	Maintenance Director
16.	**HOUSEKEEPING/LAUNDRY** • Missing Items • Complaints	Housekeeping Social Services	Housekeeping Director

17.	**SAFETY**
	• Resident Accidents by Type,
	Location, Trend
	• Drills
	    o Fire
	    o Elopement
	    o Missing Person
	• Safety Training
	• Employee Incidents/Accidents
		All Departments	Administrator
			Maintenance
			Director

18.	**HUMAN RESOURCES** • New Hires • Terminations • Exit Interview findings • Turnover Rate **STAFF DEVELOPMENT** • Learning Management Systems • Orientation • In-service	Human Resources Nursing Administrator Department Representatives	Human Services